



Core Questions

These 18 Core Questions guide reviewers through the Head Start Program Review Instrument for Systems Monitoring (PRISM) review process. Each reviewer has responsibility for providing input on these Core Questions. Review decisions for each question are made through team discussion, with the final decision by the team leader. Reviewers need to rely on their own information and information collected by others.

There is a page devoted to each Core Question. The Core Question is at the top of each page, and to the right of the Core Question are the specific citations—the Performance Standards and other regulations—included in, or represented by that Core Question. Beneath

the Core Question are several bulleted items. The bullets at the bottom of each page suggest data collection methods for that particular Core Question.

- First, they ask reviewers to refer to pertinent information gathered during various parts of the review;
- Next, they tell reviewers what to observe;
- Third, they tell reviewers which Head Start staff, parents, and community members may need to be interviewed; and

- Finally, they indicate which documents and materials are pertinent for the review.

Reviewers can take notes on the page facing

each Core Question. The notes should be clear, since they will be submitted to the team leader at the end of the review

WHAT'S NEW IN 2006?

A Mental Health Core Question (#11) has been added, and the Child Outcomes Core Question has been eliminated. The Fiscal Management (CQ8) and Disabilities Services (CQ12) Core Questions have been revised to align with the FY 2006 Fiscal Checklist and Disabilities Services Protocol, respectively. Core Questions 9A and 9B have been renamed to Prevention and Early Intervention for Health and Nutrition (9A) and Managing Health and Nutrition Services (9B). Several Core Questions have been renumbered (e.g., the Disabilities Services Core Question is now #12, the Curriculum and Assessment Core Question is now #13, etc.)

EFFECTIVENESS OF SYSTEMS		IMPLEMENTATION OF SERVICES AND PARTNERSHIPS						
		Child Development and Health Services			Family and Community Partnerships			Program Design
Prevention & Early Intervention	Individualization	Mental Health	Disabilities Services	Curriculum and Assessment	Family Partnership Building	Parent Involvement	Community Partnerships	Facilities, Materials, Equipment, and Transportation
	Program Governance							
Planning								
Communication								
Record-Keeping & Reporting								
Ongoing Monitoring								
Self-Assessment								
Human Resources								
Fiscal Management								
Eligibility, Recruitment, Selection, Enrollment, and Attendance								

QUESTION 1. PROGRAM GOVERNANCE	STANDARDS
<p>How effective is the grantee's system of shared governance in supporting the implementation of quality services to children and families?</p> <p>How does the system ensure:</p> <ul style="list-style-type: none"> • a governing body that participates in key decision-making and oversight for the program, including the formation of the Policy Council structure and function? • a formal structure of policy groups and Parent Committees with appropriate composition and process of formation? • the assignment of appropriate governing body and policy group responsibilities, including the development, review, and approval/disapproval of program policies and procedures? • written internal dispute resolution procedures for conflicts between the governing body and policy group? • inclusive and well-functioning Parent Committees? 	<p>1304.50, including Appendix A—Governance and Management Responsibilities; 1304.52 (k)</p>

- **REFER TO**—Information on governance gathered from the Family Group Interview, Governing Body Interview, and Policy Council Interview.
- **OBSERVE**—Policy Council meeting.
- **INTERVIEW**—As needed, any additional governing body and policy group members, and staff.
- **REVIEW**—Policies and procedures pertaining to governance; written definitions of roles and responsibilities of governing body members; evidence of training; governing body and Policy Council bylaws; selection of minutes of governing body, Policy Council, Policy Committee, and Parent Committee meetings; and grantee and delegate agency agreements (if applicable).

Question 1. Program Governance. How effective is the grantee's system of shared governance in supporting the implementation of quality services to children and families?

NOTES ON ISSUES, QUESTIONS, AND FOLLOW-UP

QUESTION 2. PLANNING**STANDARDS**

How effective is the grantee's ongoing system of program planning in supporting the implementation of quality services to children and families?

1308.4
1304.51(a); 1305.3; 1306.30(a);
1306.30(d); 1306.31-1306.36;

How does the system ensure:

- a community assessment that is used for program planning, including selection of appropriate program options?
- consultation with the grantee's governing body, policy groups, staff, and other community organizations?
- long-range goals and short-term program and financial objectives that address the findings of the community assessment, are consistent with the philosophy of Head Start, and reflect the findings of ongoing monitoring and the self-assessment?
- written plan(s) for implementing quality services for children and families, and supporting pregnant women as appropriate, that result in positive outcomes and are reviewed, revised, and updated as needed?

- *REFER TO*—Information on planning gathered from the Governing Body Interview and Policy Council Interview.
- *INTERVIEW*—As needed, any additional staff, governing body members, or parents as to their involvement in and knowledge of the program's planning process.
- *REVIEW*—The community assessment, statement of long-range goals and short-term objectives, decision-making about program options, and written plan(s).

Question 2. Planning. How effective is the grantee's ongoing system of program planning in supporting the implementation of quality services to children and families?

NOTES ON ISSUES, QUESTIONS, AND FOLLOW-UP

QUESTION 3. COMMUNICATION**STANDARDS**

How effective is the grantee's communication system in supporting the implementation of quality services to children and families?

How does the system ensure:

- effective communication between staff and parents, carried out on a regular basis throughout the program year and in the primary or preferred language of parents?

- that required information is shared among staff, the governing body, and policy group? (This information includes reports; HHS policies, guidelines, and communication; and program plans, policies, procedures, and grant applications.)
- that delegate agency governing bodies, Policy Committees (when applicable), and staff receive all regulations, policies, and other pertinent communication in a timely manner?
- strong communication, cooperation, and information sharing among agencies and their community partners (e.g., LEA or Part C agency, child care providers, etc.)?
- regular communication among all staff?

- *REFER TO*—Information on communication gathered from the Family Group Interview, Governing Body Interview, and Policy Council Interview.
- *OBSERVE*—Focus children's settings using the Classroom, Family Child Care, or Socialization Experience and/or the Home Visit Observation Instruments.
- *INTERVIEW*—As needed, any additional staff, parents, delegate agency staff, and community partners regarding the quality and extent of communication in the program.
- *REVIEW*—Examples of written communication among staff, such as minutes of meetings, reports, and memos; policies and procedures pertaining to communication; examples of written communication between the program and families, the program and its governing body and policy groups, and the program and child care and community partners; and examples of minutes of governing body and policy group meetings.

Question 3. Communication. How effective is the grantee's communication system in supporting the implementation of quality services to children and families?

NOTES ON ISSUES, QUESTIONS, AND FOLLOW-UP

QUESTION 4. RECORD-KEEPING AND REPORTING**STANDARDS**

How efficient and effective are the record-keeping and reporting systems in providing accurate, confidential, and timely information regarding children, families, and staff and in supporting quality services?

How are the record-keeping and reporting systems used to manage data and generate status reports that:

- identify and report program progress toward goals and objectives, and result in revised plans for the implementation of services as necessary?

- provide information on preschool children's progress?

- control program quality and maintain program accountability?

- advise Federal staff, governing bodies, policy groups, and staff of progress in implementing services?

- identify and report child abuse and neglect in compliance with applicable State and local laws?

- REFER TO—Information on record-keeping and reporting gathered from the Family Group Interview, Governing Body Interview, and Policy Council Interview.

• INTERVIEW—As needed, program management personnel about what kinds of data are collected, how data are organized, and what reports are prepared; and policy group members and members of the governing body about the extent and quality of reporting.

• REVIEW—Program policies and procedures pertaining to confidentiality; files of focus children and families (including assessment data); a selection of status reports; and a selection of reports for the governing body, policy group(s), and staff.

Question 4. Record-Keeping and Reporting. How efficient and effective are the record-keeping and reporting systems in providing accurate, confidential, and timely information regarding children, families, and staff and in supporting quality services?

NOTES ON ISSUES, QUESTIONS, AND FOLLOW-UP

QUESTION 5. ONGOING MONITORING**STANDARDS**

How effective is the grantee's ongoing monitoring system in supporting the implementation of quality services to children and families?

How does the system ensure:

- the ongoing implementation of Federal regulations, including the analysis and use of data contained in written reports, tracking systems, and the on-site observation and supervision of staff?
- ongoing monitoring to ensure tracking of patterns of progress and accomplishments for groups of children in learning and development, as well as in health and disabilities services and family and community partnerships?
- effective oversight of the delegates' ongoing implementation of the Performance Standards and other Federal regulations, when applicable?

- *REFER TO*—Information on ongoing monitoring gathered from the Family Group Interview, Governing Body Interview, and Policy Council Interview.
- *OBSERVE*—Centers and/or family child care homes and focus children's settings using the Classroom, Family Child Care, or Socialization Experience and/or the Home Visit Observation Instruments.
- *INTERVIEW*—As needed, program management personnel and any additional staff to determine the implementation of a monitoring process within the grantee and any delegate agencies.
- *REVIEW*—Program policies and procedures pertaining to ongoing monitoring; any written documentation of periodic monitoring activities, including reports to any delegate agencies; the Transportation Services Checklist; and the Health and Safety Checklist.

Question 5. Ongoing Monitoring. How effective is the grantee's ongoing monitoring system in supporting the implementation of quality services to children and families?

NOTES ON ISSUES, QUESTIONS, AND FOLLOW-UP

QUESTION 6. SELF-ASSESSMENT**STANDARDS**

How effective is the grantee's approach to self-assessment in supporting the implementation of quality services to children and families? | 1304.51(i)(1)–1304.51(i)(3)

How does the system ensure that:

- the self-assessment examines the effectiveness and progress in meeting the grantee's goals and objectives and the implementation of Federal regulations?
- the process involves policy groups, parents, and as appropriate, other community members?
- the grantee analyzes the results of the self-assessment and uses the information to address continuous improvement and to inform the grantee's planning process?

- *REFER TO*—Information on self-assessment gathered from the Governing Body Interview and Policy Council Interview.
- *INTERVIEW*—As needed, program management personnel, policy group members, and staff or governing body members regarding their involvement in the self-assessment process, its results, and any actions taken in response to the results.
- *REVIEW*—The annual self-assessment data and analysis, including progress toward meeting program goals and objectives and the implementation of Federal regulations.

Question 6. **Self-Assessment. How effective is the grantee's approach to self-assessment in supporting the implementation of quality services to children and families?**

NOTES ON ISSUES, QUESTIONS, AND FOLLOW-UP

QUESTION 7. HUMAN RESOURCES**STANDARDS**

How effective is the grantee's human resources management system in supporting the implementation of quality services to children and families?

How does the system ensure that:

- the organizational structure supports the accomplishment of the grantee's goals and objectives?
- all required functions (e.g., management, content area experts, etc.) are appropriately assigned?
- there are adequate provisions for staff supervision and support, including annual performance appraisals?
- all staff are qualified for their positions?
- services for children meet the staffing requirements set out in the Performance Standards?
- appropriate standards of conduct are delineated and followed?
- staff do not pose a significant risk to the health and safety of children and families?

- the training and development system provides a structured approach to assisting staff, governing body members, Policy Council members, and volunteers in acquiring or increasing the knowledge and skills needed to fulfill their job responsibilities, including the areas of child abuse and neglect, transportation, and transitions?

- *REFER TO*—Information on human resources management gathered from the Family Group Interview, Governing Body Interview, and Policy Council Interview.

- *INTERVIEW*—As needed, program management personnel, policy group members, volunteers, and staff to clarify position assignments, the staff appraisal process, and training and development activities.

- *REVIEW*—Program personnel policies, a set of teacher files to check for the status of CDA and progress towards obtaining 2-year and 4-year degrees, a set of staff files to check for written documentation on staff background and qualifications, initial employment information and performance appraisals, the Transportation Services Checklist, written documentation on professional development and training opportunities, and any written information on staff-child ratios.

Question 7. Human Resources. How effective is the grantee's human resources management system in supporting the implementation of quality services to children and families?

NOTES ON ISSUES, QUESTIONS, AND FOLLOW-UP

STANDARDS	
<p>How effective is the fiscal management system in supporting the implementation of quality services to children and families?</p> <p>How does the system ensure that:</p> <ul style="list-style-type: none"> • the fiscal health of the organization is maintained? • clear and appropriate internal control and monitoring procedures are in place to safeguard assets, check the accuracy and reliability of accounting data, and promote operating efficiency? • the budget is revised to ensure fiscal program accountability and compliance with Federal laws and regulations? • financial reports are consistent, timely and accurate reflecting the appropriate use of funds to support quality services? • the governing body is providing sufficient oversight? <p>1301.10-1301.13, (Subpart B); 1301.20-1301.21, (Subpart C); 1301.32-1301.33; 1304.20(c)(5); 1304.23(b)(1)(i); 1304.40(d)(1)(i); 1304.50(f); 1304.50(g)(2); 1304.51(h)(1)-1304.51(h)(2); 1304.51(i)(2); 1304.52(d)(8); 1304.53(b)(1); 1305.9; 1306.30(d); 1308.4(m)-1308.4(o); 1310.23(b); Part 74, Subpart C; Part 92, Subpart C; 2 CFR Part 220, Appendix A(A)(2); 2 CFR Part 220, Appendix A(C)(2); 2 CFR Part 220, Appendix A(G)(1)(g); 2 CFR Part 220, Appendix A(J)(a); 2 CFR Part 220, Appendix A(J)(b)(8); 2 CFR Part 225, Appendix A(C)(1)(a) – Appendix A(C)(1)(j); 2 CFR Part 225, Appendix A(C)(3)(a) – Appendix A(C)(3)(d); 2 CFR Part 225, Appendix A(H)(1)-Appendix A(H)(2); 2 CFR Part 225, Appendix B(3)(2)(a) – Appendix B(3)(2)(b); 2 CFR Part 230, Appendix A(A)(2)(a)-Appendix A(A)(2)(g); 2 CFR Part 230, Appendix A(D)(1)(b); 2 CFR Part 230, Appendix A(E)(2)(c); 2 CFR Part 230, Appendix A(E)(2)(g); 2 CFR Part 230, Appendix B(8)(c)(1); 2 CFR Part 230, Appendix B(37)(b)(8); OMB Circular A-133, Subpart B.220; OMB Circular A-133, Subpart C.315(a) – Subpart C.315(b)</p>	

- REFER TO—Information on fiscal management gathered from the Governing Body Interview and Policy Council Interview.

- INTERVIEW—As needed, the fiscal officer regarding the system of fiscal management and program management, governing body members, and policy group members about their involvement in fiscal management of the program.

- REVIEW—Items listed on the FY 2006 Fiscal Checklist.

Question 8. **Fiscal Management. How effective is the fiscal management system in supporting the implementation of quality services to children and families?**

NOTES ON ISSUES, QUESTIONS, AND FOLLOW-UP

QUESTION 9A. PREVENTION AND EARLY INTERVENTION FOR HEALTH AND NUTRITION**STANDARDS**

- How does the grantee implement a comprehensive system of services for preventing health problems, and intervening promptly when they exist?
- How does the grantee ensure that:
- in collaboration with parents, children have an ongoing source of continuous, accessible health care within required timeframes?
 - in collaboration with parents, children are kept current on well-child care, including immunizations, according to recommended EPSDT and CDC schedules; and age-appropriate screenings took place within designated timeframes?
 - in collaboration with parents and within required timeframes, children have a designated, accessible dental home.
 - the health and safety of children is assured through (1) injury prevention measures; (2) hygiene procedures; (3) the establishment and practice of effective health emergency procedures, including methods for handling suspected or known child abuse and neglect; (4) conditions of short-term exclusion and admittance; (5) medication administration procedures; and (6) the availability of first aid kits?
 - in collaboration with parents, children receive further diagnostic testing and/or treatment of health and developmental problems identified during well-child examinations or during screenings within required timeframes; IEP/IFSP services and individualization take place reflecting each child's characteristics, strengths and needs?
 - pregnant women enrolled in EHS are assisted in accessing prenatal and postpartum care and are provided with prenatal education?
 - staff and families work together to identify and meet children's nutritional needs (taking into account relevant assessment data and special dietary or feeding requirements); effective dental hygiene is practiced; applicable food safety and sanitation laws are met; and developmentally appropriate foods are served within suitable timeframes?
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- **REFER TO**—Information on prevention and early intervention gathered from the Family Group Interview and the Community Partnerships Interview.
 - **OBSERVE**—Centers with focus children using the Classroom, Family Child Care, or Socialization Experience Observation Instrument and the Health & Safety Checklist; Focus child homes using the Home Visit Observation Instrument; dental hygiene; food preparation and storage; food transport (if applicable); posted inspections; food/formula served; and bus safety (Transportation Services Checklist).
 - **INTERVIEW**—As needed, health and nutrition staff/consultants; staff who perform screenings or who assist parents with child health needs; bus drivers/monitors; enrolled pregnant women; HSAC members, community partners and parents about prevention and early intervention.
 - **REVIEW**—The Health Services Protocol and Nutrition Services Protocol; focus child files for results from (and the timeliness of) developmental screenings, examinations, further diagnostic testing (as needed) and ongoing observations; pregnant women files for prenatal care; safety checklists; accident/injury reports; service plans/P&P; HSAC minutes; menus; training/HIR files; inspection reports; interagency agreements; Community Assessment; Self Assessment; Resource Directory and parent communication.

Question 9a. Prevention and Early Intervention for Health and Nutrition. How does the grantee implement a comprehensive system of services for preventing health problems, and intervening promptly when they exist?

NOTES ON ISSUES, QUESTIONS, AND FOLLOW-UP

QUESTION 9B. MANAGING HEALTH AND NUTRITION SERVICES**STANDARDS**

How does the grantee effectively manage health and nutrition services, including tracking of all child health and developmental services to ensure that follow-up services are received in a timely manner?

How does the grantee ensure that:

- effective tracking of medical/dental examinations, screening results and applicable risk-assessment (i.e., lead or TB exposure) or testing exists?
 - medical, developmental and dental follow-up care is accomplished in a timely manner and monitored through resolution of the problem (treatment complete), if applicable; and effective procedures exist to identify new or recurring concerns to facilitate timely referrals and intervention?
 - mechanisms are in place that support communication among staff, parents, and community providers to assure follow-up services are received, while maintaining confidentiality standards?
 - there is participation in USDA Child nutrition programs and that the design and implementation of the nutrition program meets the nutritional needs and feeding requirements of each child, including those with special dietary needs and children with disabilities, and that parents and community partners are involved in nutrition services?
 - systems are in place to ensure that family-style meals are appropriately scheduled and managed; a variety of foods are served taking into account the cultural and ethnic preferences of families; and opportunity is provided for children to be involved, as developmentally appropriate, in food-related activities?
- **REFER TO**—Information on the management of health and nutrition services gathered from the Family Group Interview and the Community Partnerships Interview.
- **OBSERVE**—Interactions between staff, parents and community partners; security of files; child health status; communication sources; meal service (center-based and socialization); and infant/toddler feedings.
 - **INTERVIEW**—Staff responsible for overseeing tracking of medical, developmental and dental follow-up care; teachers and/or home visitors; parents about assistance from the program in obtaining needed services; community partners, including HSAC members; individuals responsible for the management of nutrition services (including consultants, if available); and classroom staff about family-style meals and infant/toddler feedings.
 - **REVIEW**—The Health Services Protocol and Nutrition Services Protocol; Child files; the health tracking system and its relationship to the grantee's record-keeping and reporting system (Core Question #4); monitoring reports; training records to ensure staff competence; Service Plans/Policies & Procedures; Policy Council, Parent Committee or HSAC minutes; Community Assessment; Interagency Agreements; and classroom schedules.

Question 9b. Managing Health and Nutrition Services. How does the grantee effectively manage health and nutrition services, including tracking of all child health and developmental services to ensure that follow-up services are received in a timely manner?

NOTES ON ISSUES, QUESTIONS, AND FOLLOW-UP

QUESTION 10. INDIVIDUALIZATION**STANDARDS**

How does the grantee individualize the program of child development and health services to meet each child's unique characteristics, strengths, and needs, as determined in consultation with the family?

How does the grantee ensure that:

- individualization is based on the results of ongoing child assessment linked to curriculum goals and reflected in the program's curriculum, planning, record-keeping, and family partnership process?
- individualization addresses child interests, learning and development, temperament, language, cultural background, and learning style?

- *REFER TO*—Information on individualization gathered from the Family Group Interview.
- *OBSERVE*—Focus children's settings for evidence of individualization of the curriculum based on the ongoing assessment information using the Classroom, Family Child Care, or Socialization Experience and/or the Home Visit Observation Instruments.
- *INTERVIEW*— Teachers and/or home visitors, family child care teachers, and parents of the focus children about how the program individualizes services, using information gathered from the ongoing assessment of children.
- *REVIEW*—Relevant components of the Health Services Protocol and Nutrition Services Protocol, relevant components of the Early Childhood Development Protocol (available Fall 2005), written curriculum, periodic recordings of each child's developmental progress, and the program's plan for services for children.

Question 10. Individualization. How does the grantee individualize the program of child development and health services to meet each child's unique characteristics, strengths, and needs, as determined in consultation with the family?

NOTES ON ISSUES, QUESTIONS, AND FOLLOW-UP

QUESTION 11. MENTAL HEALTH**STANDARDS**

How does the grantee implement a comprehensive system of mental health prevention and intervention to children and families, including providing mental health awareness and education to staff?

How does the grantee ensure that:

- the program is designed and managed to ensure that the service of a mental health professional (or professionals) is on a regular schedule of sufficient frequency to ensure the timely and effective identification of and intervention in family and staff concerns about a child?
- other community mental health resources are used as needed?
- each child receives an appropriate and timely (within 45 days of the child's entry into the program) screening to identify, using multiple sources of information, and address any behavioral, social, emotional concerns?
- the staff work with parents to discuss and identify appropriate responses to their children's behavior including how to strengthen nurturing, supportive environments and relationships in the home and at the program?
- parents receive mental health education on issues that place families at risk (including, for pregnant women, education and referrals if needed for maternal depression and substance abuse) and other appropriate intervention, including opportunities to participate in counseling programs?
- parents, program staff and the mental health professional design and implement program practices that are responsive to the identified behavioral and mental health concerns of an individual or group of children including providing special help to children with atypical behavior?

• REFER TO—Information about mental health services gathered from the Family Group Interview.

- OBSERVE—Centers and/or family child care homes for evidence of supporting children's mental health needs; staff and child interactions.
- INTERVIEW—Relevant community partners (i.e. mental health professionals; mental health referral sources); focus families; mental health staff; family service staff; education staff and management about how the mental health plan is developed and implemented; how progress is monitored; how atypical behavioral needs are addressed; how families are involved in mental health service; how families and staff receive information related to mental health; and whether mental health services meet families expectations and circumstances.

- REVIEW—The Mental Health Services Protocol; the grantee's plan for mental health services; mental health contract and/or memorandum of agreements with mental health professionals or agencies if applicable; mental health professional's qualifications; child and family service records; training plan or training agendas (any evidence of training and/or educational opportunities for parents and staff re: mental health); relevant individual child or family plans (IFSPs, IEPs); and results from behavioral screenings.

Question 11. **Mental Health.** How does the grantee implement a comprehensive system of mental health prevention and intervention to children and families, including providing mental health awareness and education to staff?

NOTES ON ISSUES, QUESTIONS, AND FOLLOW-UP

QUESTION 12. DISABILITIES SERVICES**STANDARDS**

How does the grantee ensure that individualized services are effectively provided to children with diagnosed or suspected disabilities?

How does the grantee ensure that:

- its program is designed and managed to make at least ten percent of its enrollment opportunities available to children with disabilities and support the effective inclusion of these children and their families in the full range of program activities?
 - its services to children with disabilities and their families are well coordinated with community partners, particularly the local education agencies (LEAs) and Part C agencies responsible for implementing the Individuals with Disabilities Education Act?
 - the need for any early intervention, special education, and/or related services are identified promptly and in coordination with the Part C agency and/or LEA?
 - children determined to have disabilities receive special education and related services needed through implementation of an IEP/IFSP?
 - parents of children with disabilities are supported and involved as decision-makers and receive information and assistance in understanding and advocating for services and support needed to address their child's special needs?

- REFER TO—Information on services to children with disabilities gathered from the Family Group Interview and Community Partnerships Interview.

- OBSERVE—Focus children's settings for evidence of individualization of the curriculum based on the ongoing assessment information using the Classroom, Family Child Care, or Socialization Experience and/or the Home Visit Observation Instruments.

- INTERVIEW—Teachers and/or home visitors, family child care teachers, and parents of the focus children about how the program individualizes services, using information gathered from the ongoing assessment of children.
 - REVIEW—The Disabilities Services Protocol, written curriculum, periodic recordings of each child's developmental progress, and the program's plan for services for children.

Question 12. Disabilities Services. How does the grantee ensure that individualized services are effectively provided to children with diagnosed or suspected disabilities?

NOTES ON ISSUES, QUESTIONS, AND FOLLOW-UP

QUESTION 13. CURRICULUM AND ASSESSMENT**STANDARDS**

How has the grantee engaged in a process of curriculum selection and/or development, implementation, and evaluation resulting in a written plan that supports the growth of children's social competence, including school readiness, for each identified program option?

How does the grantee ensure that:

- the written curriculum includes (a) goals for children's development and learning; (b) the experiences through which children will achieve these goals; (c) what staff and parents can do to help children achieve these goals; (d) the materials needed to support the implementation of the curriculum towards achieving the stated goals; and (e) consistency with the Performance Standards and sound child development principles?
- the curriculum implementation, including assessment, provides appropriate environments and comprehensive programming for children from birth to age five?
- ongoing child assessment (a) is linked to curriculum goals and (b) provides for the collection of information on children's progress?
- the curriculum and assessment process support the inclusion of children with disabilities?
- parents are involved in curriculum implementation and reporting child progress?

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- **REFER TO**—Information about curriculum development and implementation, including the linkages with child assessment, gathered from the Family Group Interview.
 - **OBSERVE**—Focus children's settings using the Classroom, Family Child Care, or Socialization Experience and/or the Home Visit Observation Instruments.
 - **INTERVIEW**—As needed, teachers and/or home visitors, family child care teachers, family workers, and parents of the focus children about their involvement in curriculum development and their knowledge and involvement of its implementation in the program.
 - **REVIEW**—The Early Childhood Development Protocol (available Fall 2005), the grantee's plan for child development services, the written curriculum, daily schedules, and the Transportation Services Checklist.

Question 13. Curriculum and Assessment. How has the grantee engaged in a process of curriculum selection and/or development, implementation, and evaluation resulting in a written plan that supports the growth of children's social competence, including school readiness, for each identified program option?

NOTES ON ISSUES, QUESTIONS, AND FOLLOW-UP

QUESTION 14. FAMILY PARTNERSHIP BUILDING**STANDARDS**

How does the grantee engage in a process of collaborative partnership building with parents?
 1304.20(e); 1304.21(a)(2);
 1304.23(b)(4); 1304.40;
 1304.50(a)(1); 1306.30(b);
 1308.19(j); 1308.21

- How does the grantee ensure that:
- meetings and one-on-one interactions are respectful of each family's diversity and cultural background?
 - opportunities exist for parents to develop relationships with program staff and to participate in an individualized family partnership agreement process?
 - staff work with families throughout the year to identify family goals, strengths, and necessary services and supports, and to describe progress in achieving family goals?
 - staff work with parents to identify and access services and resources responsive to their interests and goals, and follow up with them to ensure that the referrals met their expectations and circumstances?
 - for programs that enroll pregnant women, infants, and toddlers, assistance is available to mothers in accessing comprehensive prenatal and postpartum care?

- Core Questions
- **REFER TO**—Information on family partnership building gathered from the Family Group Interview.
 - **OBSERVE**—Focus children's settings using the Classroom, Family Child Care, or Socialization Experience and/or the Home Visit Observation Instruments.
 - **INTERVIEW**—Relevant community partners and, as needed, focus families and family services personnel and other staff working with families about how the program partners with parents, how the family partnership agreement process is developed and implemented, how progress is monitored, how families are connected to community resources, and what services are provided to families with pregnant women.
 - **REVIEW**—Conversation or anecdotal notes; any evidence describing family goals and progress in meeting them, such as family portfolios; information on pre-existing plans with other agencies, when applicable; and the program's written plan for family and community partnerships.

Question 14. Family Partnership Building. How does the grantee engage in a process of collaborative partnership building with parents?

NOTES ON ISSUES, QUESTIONS, AND FOLLOW-UP

QUESTION 15. PARENT INVOLVEMENT**STANDARDS**

How does the grantee provide parent involvement opportunities?

How does the grantee ensure that:

- parents are involved in the development of the program of services for children, including home visits; parent conferences; the delivery of health care services to children; the development of the curriculum; planning, implementing, and evaluating nutrition services; and developing and implementing services for children with disabilities?

• opportunities are responsive to the ongoing and expressed interests and needs of individual parents and groups of parents?

- parents have opportunities to enhance their skills and knowledge in the following areas:
 - knowledge of child growth and development, the program's curriculum, the child assessment process, and parenting skills;
 - prevention of child abuse and neglect;
 - family literacy;

- medical, dental, mental health and nutrition (encouraging parents to become active partners in their child's health care process and learn the principles of preventive health and safety);

- community advocacy (encouraging parents to influence the character and goals of community services);
- transition activities (assisting parents in becoming their child's advocate as the child moves to public school or another child care setting);
- prenatal education on fetal development, labor and delivery, and postpartum recovery, as appropriate?

• REFER TO—Information on parent involvement gathered from the Family Group Interview.

- INTERVIEW—As needed, focus families, family services and other staff working with families, policy group members, and relevant community partners about how the agency plans for and fosters parent involvement.

- REVIEW—Documentation of home visits and parent/teacher conferences, records of parent involvement activities, documentation of parent participation in Parent Committee and policy groups, staff or parent training records, and the program's plan for parent involvement.

Question 15. Parent Involvement. How does the grantee provide parent involvement opportunities?

NOTES ON ISSUES, QUESTIONS, AND FOLLOW-UP

STANDARDS	
<p>How does the grantee take an active role in community planning and advocacy to improve the delivery of services to children and families?</p> <p>How does the grantee:</p> <ul style="list-style-type: none"> • develop community partnerships, supported by interagency agreements, as appropriate (e.g., with the LEA or Part C agency, child protective services, or local transportation system)? • establish collaboration within the grantee agency and across agencies? • promote the access of children, families, and pregnant women, as appropriate, to community services that are responsive to their needs, such as child care? • coordinate services to children with disabilities and their families with community agencies? • encourage volunteers to participate in Head Start? • support the transitions of families in, through, and out of Head Start and Early Head Start? • establish and maintain an effective Health Services Advisory Committee that includes parents, professionals, and other volunteers from the community? • establish and maintain other service advisory committees as appropriate to address program issues and to help the program respond to expressed family and community needs? 	<p>1304.23(b)(4); 1304.24(a)(3)(iv); 1304.40(e)(4); 1304.41; 1308.4(l); 1310.23</p>
<p>• REFER TO—Information on community partnerships gathered from the Family Group Interview, Governing Body Interview, Policy Council Interview, Child Care Partnerships Interview, and Community Partnerships Interview.</p> <p>• INTERVIEW—As needed, a small number of community partners; focus families; Health Services Advisory Committee members and other advisory group members, as appropriate; and staff (including disabilities services staff) about the existence and effectiveness of community partnerships and interagency services for children and their families.</p> <p>• REVIEW—Interagency agreements; community resource guide to determine if it addresses families' comprehensive needs; the program's plan for community involvement, planning, assessment, and advocacy for all families; services for children with disabilities; and activities to facilitate transition.</p>	

Question 16. Community Partnerships. How does the grantee take an active role in community planning and advocacy to improve the delivery of services to children and families?

NOTES ON ISSUES, QUESTIONS, AND FOLLOW-UP

QUESTION 17. ELIGIBILITY, RECRUITMENT, SELECTION, ENROLLMENT, AND ATTENDANCE STANDARDS

How does the grantee approach eligibility, recruitment, selection, enrollment, and attendance in an attempt to meet the needs of Head Start-eligible families and in response to the community assessment? | 1305.3-1305.8; 1308.5

How does the grantee:

- define the recruitment area?
- determine the eligibility of children, ensuring that no more than 10% come from families that exceed the low-income guidelines?
- ensure that at least 10% of enrollment opportunities are made available to children with disabilities?
- recruit those most in need of Head Start services, including previously underserved populations?
- select children and families based on enrollment criteria, and maintain a waiting list?
- assign children to program options that meet the needs of their families?
- meet the service requirements for each option?
- maintain the funded enrollment level, fill vacancies as they occur, and analyze enrollment data to inform the planning process?
- analyze the causes of absenteeism, when average daily attendance falls below 85%?

• REFER TO—Information on eligibility, recruitment, selection, enrollment, and attendance gathered from the Family Group Interview, Governing Body Interview, and Policy Council Interview.

• INTERVIEW—As needed, family services personnel, focus families, and policy group members.

• REVIEW—The current community assessment; eligibility, selection, and enrollment criteria; written information on the recruitment process and the recruitment area; the current waiting list of eligible children; income verification forms from focus children's records; class rosters and home visitor assignments; the set of attendance records; written enrollment procedures; evidence of recruitment and enrollment of children with disabilities; and the Policy Council meeting minutes concerned with eligibility, selection, and enrollment issues.

Question 17. Eligibility, Recruitment, Selection, Enrollment, and Attendance. How does the grantee approach eligibility, recruitment, selection, enrollment, and attendance in an attempt to meet the needs of Head Start-eligible families and in response to the community assessment?

NOTES ON ISSUES, QUESTIONS, AND FOLLOW-UP

STANDARDS	
<p>QUESTION 18. FACILITIES, MATERIALS, EQUIPMENT, AND TRANSPORTATION</p> <p>How does the grantee ensure that facilities, materials, equipment, and transportation services, when they are provided, are safe, appropriate, and conducive to learning and reflective of the different ages and stages of development of each child, including children with disabilities, for the conduct of all program activities?</p> <p>How does the grantee ensure that:</p> <ul style="list-style-type: none"> • construction of facilities and purchase of vehicles meet all requirements? • required inspections, maintenance, and repairs are taking place, and facilities and transportation vehicles are in compliance with all relevant Federal, State, tribal, and local requirements? • center-based environments are free of toxins, such as smoke, lead, pesticides, and herbicides? • arrangements and space, as well as types and uses of materials and equipment, match the grantee's identified curriculum? • the facilities, materials, equipment, and vehicles are accessible to persons with disabilities as required by Section 504 of the Rehabilitation Act? 	<p>1304.21(a)(4)(iv); 1304.21(a)(5)–1304.21(a)(6); 1304.22(e)(7); 1304.23(e); 1304.53(a)(1)–1304.53(a)(5); 1304.53(a)(6); 1304.53(a)(7)–(9); 1304.53(a)(10)(iv); 1304.53(a)(10)(xiv)–1304.53(a)(10)(xv); 1304.53(a)(10)(xvi); 1304.53(b); 1306.30(c); 1308.4(o)(4)–1308.4(o)(6); 1310.10; 1310.12(b); 1310.13–1310.15(b); 1310.15(d); 1310.20; 1310.22(b); 1310.23; 45 CFR 84.5</p> <p>.....</p> <ul style="list-style-type: none"> • REFER TO—Information on facilities, materials, equipment, and transportation gathered from the Family Group Interview. • INTERVIEW—As needed, a small number of staff to determine accommodations for children with disabilities or special needs and adequacy and maintenance of facilities, equipment, and transportation vehicles. • REVIEW—The results from ongoing monitoring of health and safety, the annual safety inspection, licenses, maintenance logs, procurement requests and/or purchasing records (if needed), the Health and Safety Checklist, and the Transportation Services Checklist.

Question 18. Facilities, Materials, Equipment, and Transportation. How does the grantee ensure that facilities, materials, equipment, and transportation services, when they are provided, are safe, appropriate, and conducive to learning and reflective of the different ages and stages of development of each child, including children with disabilities, for the conduct of all program activities?

NOTES ON ISSUES, QUESTIONS, AND FOLLOW-UP